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## APPLICANTS

Barry H. Schwab, W. Bloomfield, MI;

## \*\* CONTINUING DATA \*\*\*\*

This application is a CIP of 08/205,885 03/03/1994 ABN  
 and is a CIP of 08/393,493 02/24/1995 PAT 6,353,699  
 and is a CIP of 08/410,318 03/24/1995 ABN  
 and is a CIP of 08/453,393 05/30/1995 PAT 5,973,731  
 and is a CIP of 09/020,456 02/09/1998 PAT 6,226,412

*Yes 21*

## \*\* FOREIGN APPLICATIONS \*\*\*\*

*None 21*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 11/30/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged  <i>[Signature]</i>	Examiner's Signature <i>21</i> Initials	MI	3	33	5

## ADDRESS

LAW OFFICE OF JOHN CHUPA & ASOCIATES, P.C.  
 28535 ORCHARD LAKE RD.  
 STE. 50  
 FARMINGTON HILLS , MN  
 48334

## TITLE

Secure identification system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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